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Bib Data Sheet

CONFIRMATION NO. 5583

SERIAL NUMBER 10/607,121	FILING OR 371(c) DATE 06/26/2003 RULE	CLASS 604	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. 022719-0040
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APPLICANTS

Meir Rosenberg, Newton, MA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

none
none *21 Dec 06*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

09/16/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MA	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

21125

TITLE

Self adjusting hydrocephalus valve

FILING FEE RECEIVED 850	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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